

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN VOTE!		FEC IDENTIFICATION NUMBER ▼ C C00473918	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mission Control			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 15 / 2014		
Mailing Address 114 A. Mansfield Hollow Road			Amount 10698.04		
City Mansfield Center	State CT	Zip Code 06250	Transaction ID : WFT201411706-1		
Purpose of Expenditure Mailhouse		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Jolly David		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		District: 13 State: FL
Calendar Year-To-Date Per Election for Office Sought		85376.94	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Sp-Gen		

Full Name of Payee Mission Control			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 15 / 2014		
Mailing Address 114 A. Mansfield Hollow Road			Amount 15263.81		
City Mansfield Center	State CT	Zip Code 06250	Transaction ID : WFT201411708-1		
Purpose of Expenditure Mailhouse		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Jolly David		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate		District: 13 State: FL
Calendar Year-To-Date Per Election for Office Sought		85376.94	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Sp-Gen		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	25961.85
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	25961.85

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Fines Caroline

[Electronically Filed]

Date

MM / DD / YYYY
02 / 17 / 2014

Signature